PTO/SB/05 (08-03)
Approved for use through 7/31/2005. ONB 0651-0032
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		PAT	ENT APPLIC		FEE DETE		N RECORD			Application or Docket Number 09.374081		
	CLAIMS AS FILED - PART I (Column 1) (Column 2)							SMALL ENTITY		<b>O</b> R		R THAN ENTITY
		FOR NUMBER FILED			NUMBE	NUMBER EXTRA		RATE	FEE		RATE	FE€
	BAS	IC FEE CFR 1.16(a))							s	OR		
	TOT	AL CLAIMS					I	x 5		-	x 5•	
	INDE	CFR 1.18(c)) EPENDENT CLAIR	ıs	minus 20		<del></del>	ł			OR		<u> </u>
天	(37 (	FR 1.16(b)) minus 3 = "					ŀ	x s		OR	× 5	
	MUL	ILTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d))  the difference in column 1 is less than zero, enter "0" in column 2.					L	+ \$		OR	+5	
7	. 11 ft							TOTAL		OR	TOTAL	
amat claims as amended - part ii												
	$\hat{f}_{i}$		(Column 1)		(Caluma 2)	(Column 3)	_	SMALL E	NTITY	OR		R THAN ENTITY
	NTA	10-1304	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		BIAH	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
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		Independent (37 CFR 1.16(b))	. 3	Minus	<sub>2</sub>	• (	ſ	x s = `		OR	x s	
2	¥	FIRST PRESENT	ATION OF MULTIPLE	E DEPEND	ENT CLAIM (37 CF	R 1.16(d))	ſ	+ : -		OR	+3 -	
2	<u>_</u>	10001					L	TOTAL		OR	TOTAL	
2	L	17/12						ADD'L FEE		) OR	ADD'L FEE	
		703	(Column 1)	ſ	(Cotumn 2) HIGHEST	(Column 3)	Г					
	MENT B		REMAINING AFTER AMENDMENT		NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL IFEE		RATE	ADDI- TIONAL FEE
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	END	independent (37 CFR 1.16(b))	• 3	Minus	" S	7	ſ	x \$ _ =	1:	OR	x s =	7
ł	¥	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))					t	+ 5 .	/	OR	+5 -	
				L	TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	/			
			(Column 1)		(Column 2)	(Column 3)						
	O F		CLAIMS REMAINING AFTER		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Ψ̈́	Total	AMENDMENT	Minus	**	•	t		1			
- [	ğ	(A7 CF 9 1,16(c))	•	Minus	•••	3	ŀ	× \$=		OR	<u>                                     </u>	
l	AMENDMENT	Independent (37 CFR 1,16(b))				L	ŀ	x s=		OR	X 5*	
	Ŕ	FIRST PRESENT	ATION OF MULTIPLE	DEPEND	ENT CLAIM (37 CF	R 1.16(d))	L	+ 5 ==		OR	+ 5 -	
								TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	

"" If the "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including pathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TOI; Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Ma B			
STITION FOR XTENSION OF TIME UND	ER 37 CFR 1.136(a)	Docket Number (Optional) 81762/210	
CERTIFICATE OF MAILING I hereby certify that this correspondence is being	In re Application of Craig H.		
deposited with the United States Postal Service with	Application Number 09/374,6		
sufficient postage for first class mail in an envelope addressed to Mail Stop, Commissioner	For LOW INSERTION FOR	CE ELECTRICAL SOCKET CONTACT	
for Patents, P.O. Box 1450, Alexandria, VA 22313- 1450, or being facsimile transmitted to the USPTO	Group Art Unit 2839	Examiner Son Nguyen	
signature A Ten Others No	Group Art Omt 2039	Examine Son Nguyen	
Name:Sherri A, Moscato			
This is a request under the provisions or reply in the above identified application		e period for filing a	
The requested extension and appropria (check time period desired):	te entity fee are as follows		
One month (37 CFR 1.17	(a)(1)) - (\$60/\$120)	\$\$60	
☐ Two months (37 CFR 1.1	7(a)(2)) - (\$225/\$450)	\$	
☐ Three months (37 CFR 1	17(a)(3)) - (\$510/\$1020)	\$	
☐ Four months (37 CFR 1.1	7(a)(4)) - (\$795/\$1590)	s	
☐ Five months (37 CFR 1.1	7(a)(5)) - (\$1080/\$2160)	. \$	
Applicant claims small entity state	ıs.		
A check to cover the fee is enclose	×d.	•	
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The Commissioner is hereby authors be required, or credit any overpays I have enclosed a duplicate copy of	nent, to Deposit Account Numb		
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I am the applicant/inventor	ı	·	
	entire interest. See 37 CFR 3.7 CFR 3.73(b) is enclosed. (Form		
attorney or agent of recor	d.		
attorney or agent under 3		·	
Registration number	if acting under 37 CFR 1.34(a)	·	
Juman Jam	berg.	April 4, 2005	
Signature	•	Date	
Gunnar G. Leinberg Typed or printed na		(585) 263-1014 Telephone Number Banalls 03093132 1411	
			38 0937468
NOTE: Signatures of all the inventors or assigne forms if more than one signature is required, see		ir representative(s) are required CSubmit multiple மி [ ]	
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